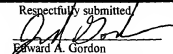


UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))	Attorney Docket No. ITV-003	
	First Named Inventor	Buehler
	Title	Computerized Method and Apparatus for Determining Field-of View Relationships Among Multiple Image Sensors

APPLICATION ELEMENTS 1. <input checked="" type="checkbox"/> Fee Transmittal Form 2. <input type="checkbox"/> Small Entity Status <input type="checkbox"/> Applicant claims small entity status <input type="checkbox"/> Status established in prior application and is still proper and desired 3. <input checked="" type="checkbox"/> Specification and Drawings [Total Pages 43] - Written Description - (24 pages) - Claims - (9 pages) - Abstract - (1 page) - Sheets of Drawings - (9 sheets) <input type="checkbox"/> Formal <input checked="" type="checkbox"/> Informal 4. <input type="checkbox"/> Oath or Declaration [Total Pages] a. <input type="checkbox"/> Newly executed (original) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 17 completed)</i> <i>[Note Box 5 below]</i> 5. <input type="checkbox"/> Incorporation by Reference (usable if Box 4b is checked) The entire Disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein. 6. <input checked="" type="checkbox"/> Application Data Sheet 7. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <input type="checkbox"/> Computer Readable Form (CRF) <input type="checkbox"/> Paper Copy (identical to computer copy) <input type="checkbox"/> CD (2 copies) (identical to computer copy) <input type="checkbox"/> Statement verifying identity of above copies	ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450
	ACCOMPANYING APPLICATION PARTS 8. <input type="checkbox"/> 37 CFR 3.73(b) Statement (when there is an assignee) <input type="checkbox"/> Power of Attorney 9. <input type="checkbox"/> English Translation Document (if applicable) 10. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 11. <input type="checkbox"/> Preliminary Amendment <input type="checkbox"/> Drawings [Total Sheets] 12. <input checked="" type="checkbox"/> Return Receipt Postcard (specifically itemized) 13. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority claimed) 14. <input type="checkbox"/> Nonpublication Request Under 35 U.S.C. 122(b) 15. <input type="checkbox"/> CD in duplicate for large table or computer program 16. <input checked="" type="checkbox"/> Other: Check in the amount of \$447.00

17. <input type="checkbox"/> If a CONTINUING APPLICATION: Amend the specification by inserting on page 1, before the first line, the sentence: --This is a <input type="checkbox"/> continuation <input type="checkbox"/> divisional <input type="checkbox"/> continuation-in-part of prior application Serial No. _____, filed on _____, the entire disclosure of which is incorporated by reference herein.-- Priority to the above application(s) is claimed under 35 U.S.C. 120. Prior application information: Examiner: _____ Group/Art Unit: _____
18. <input checked="" type="checkbox"/> Priority - 35 U.S.C. 119 <input checked="" type="checkbox"/> Priority of application Serial No. 60/425,267 filed on November 12, 2002 in U.S. is claimed under 35 U.S.C. 119. <input type="checkbox"/> The certified copy has been filed in prior U.S. application Serial No. _____/_____ on _____. <input type="checkbox"/> The certified copy will follow.

CORRESPONDENCE ADDRESS	SIGNATURE BLOCK
Direct all correspondence to: Patent Administrator Testa, Hurwitz & Thibault, LLP High Street Tower 125 High Street Boston, MA 02110 Tel. No.: (617) 248-7000 Fax No.: (617) 248-7100 Customer No. 021323	Respectfully submitted,  Date: September 11, 2003 Reg. No. 54,130 Tel. No.: (617) 310-8619 Fax No.: (617) 248-7100 Edward A. Gordon Attorney for the Applicant Testa, Hurwitz & Thibault, LLP High Street Tower 125 High Street Boston, MA 02110

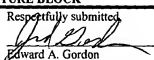


1798 U.S. PTO
09/11/03

Express Mail Label No.: EV093436317US

FEE TRANSMITTAL
FY 2003

Complete if Known	
Application Serial Number	Not yet assigned
Filing Date	Herewith
First Named Inventor	Buehler
Group Art Unit	Not yet assigned
Examiner Name	Not yet assigned
Attorney Docket No.	ITV-003

METHOD OF PAYMENT				FEE CALCULATION (continued)																																																																																							
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2. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 20-0531. <input type="checkbox"/> Required Fees (copy of this sheet enclosed). <input checked="" type="checkbox"/> Additional fee required under 37 CFR 1.16 and 1.17. <input checked="" type="checkbox"/> Overpayment Credit. 3. <input checked="" type="checkbox"/> Applicant claims small entity status.																																																																																											
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